



COMPLAINT FOR REVIEW OF ASSESSMENT
State Tax Commission of Missouri
P.O. Box 146, Jefferson City, Missouri 65102-0146

**PERSONAL PROPERTY
MANUFACTURERS PROPERTY**

TYPE OR PRINT

Taxpayer's Name:					
Street Address of Property:			City:	State:	Zip Code:
Assessor's Account Number of the Property:			County in Which the Property is Located:		
Value set by the Assessor		Value set by the Board of Equalization		Taxpayer's Proposed Value	
True Value (Market)	Assessed Value	True Value (Market)	Assessed Value	True Value (Market)	Assessed Value

Value of the property is generally an issue in every appeal. If you believe the assessment is incorrect on other grounds, you must indicate those grounds by checking the appropriate boxes. *Check all that apply.*

If you do not specify any other ground, this complaint will be reviewed only for overvaluation.

- ☐ Discrimination
- ☐ Exemption – the property should be exempt because it is:
☐ Religious ☐ Charitable ☐ Educational ☐ Other (explain): _____
- ☐ Misclassification
- ☐ Other (explain): _____

A LIST DESCRIBING THE PERSONAL PROPERTY MUST BE ATTACHED TO THIS FORM.

The list of the property is to give the complete description of the personal property including the acquisition cost and date of acquisition of each item of personal property.

A COPY OF THE BOARD OF EQUALIZATION DECISION MUST BE ATTACHED TO THIS FORM.

(In the City of St. Louis, it is the Board of Merchant's and Manufacturer's Tax Equalization)

Please note: Only the taxpayer or his attorney may sign this Complaint. Missouri law requires attorney representation for all corporations, partnerships, trusts and other legal entities which are not natural persons. *There are no exceptions.*

Taxpayer or Attorney Signature – Please Print then Sign:			DO NOT WRITE IN THIS SPACE
Daytime Telephone (with Area Code) :		Bar Number:	
Mailing Address (Street/Box Number)			
City	State	Zip Code	